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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/879,770	06/11/2001	David M. Aronovitz	SUN-P6047-SH	4711

28422 7590 04/13/2005

HOYT A. FLEMING III

P.O. BOX 140678

BOISE, ID 83714

EXAMINER

DESIR, JEAN WICEL

ART UNIT

PAPER NUMBER

2614

DATE MAILED: 04/13/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Witt

<b>Interview Summary</b>	<b>Application No.</b>	<b>Applicant(s)</b>	
	09/879,770	ARONOVITZ, DAVID M.	
	<b>Examiner</b>	<b>Art Unit</b>	
	Jean W. Désir	2614	

All participants (applicant, applicant's representative, PTO personnel):

- (1) Jean W. Désir. (3) \_\_\_\_.
- (2) Hoyt A. Fleming III (Applicant's representative). (4) \_\_\_\_.

Date of Interview: 11 April 2005.

Type: a) ☒ Telephonic b) ☐ Video Conference  
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.  
If Yes, brief description: \_\_\_\_.

Claim(s) discussed: 1.

Identification of prior art discussed: Wakai et al. (US 5,973,722).

Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The subject matter "wherein the video data is output from the graphics adapter in digital form" was discussed, and the Examiner maintained that the graphics adapter (item 530 of Fig. 5 of the prior art) outputs video data in digital form as claimed.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

  
Examiner's signature, if required